



TICP INSTRUCTOR INVOICE FORM

INSTRUCTOR INFORMATION

Name:

Current address:

City:

Prov:

Postal Code:

Email:

I prefer to receive payment by e-transfer ☐

I prefer to receive payment by cheque ☐

*If you would like to donate part or all your teaching fees to the **TICP Community Clinic Fund** and receive a charitable receipt, please contact the office at info@ticp.on.ca*

INSTRUCTIONAL RATES

4 Year Program Rate: \$100 per seminar, split if co-teaching (\$50 per seminar); panels are \$75.00 per instructor per seminar.

Essentials, Fellowship and Extension Program Rate: \$150 for each seminar; when there are co-teachers, \$75.00 per instructor per seminar.

SEMINAR INFORMATION

Details of Seminar(s) (i.e. January 5/15, Year 3 Transference, 1 seminar)

TOTAL INVOICE AMOUNT:

FOR TICP OFFICE USE ONLY

Attendance Form received ☐

Evaluation Form received ☐

Payment issued on:

Cheque #

E-Transfer #: